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DRUGS AND CRIME

(Report of Committee "G" of the Institute¹)

L. L. STANLEY (For the Committee)

Following the course of developments in the world's affairs in the past few years, with retrogression instead of progression, bitterness and strife opposed to harmony and peace, it is seen that many forces must be checked which tend to ultimate evil, and the forces which help to ultimate good must be encouraged.

Under such conditions, more than ever before, should greater attention be paid to the opium addiction, one of those evils which insidiously weakens the nation, not in an open and bold way, but in a secret and hidden manner.

Morphine, on the battlefield, is an absolute necessity. It gives ease to the wounded soldier and saves him from untold pain, tiding him over from the front line trench by the stretcher bearers, and back to the clearing station or hospital, by the bumping ambulance. The drug is quite accessible, as it should be under such conditions, and instructions are given to administer it to the injured soldier. This accessibility, however, may tend to evil, for the drug may fall into unreliable hands—the injured soldier may be given too much over too long a period; there may be unscrupulous trafficking in it, and older addicts may influence younger men to use it. All these conditions should be carefully guarded, for at the present time there are many addicts in the United States who first began the use of morphine when they were soldiering in the Philippine Islands during the Spanish-American war. Their addiction has clung to them and has completely ruined their lives. It will be a great calamity if a proportionately large number of addicts return from the battlefield of Europe as came from the Philippines following our little war.

At home, great care must be exercised in handling the narcotic drug situation. No man who is a morphine, cocaine or opium addict will be taken into the army. He is physically unfit as well as morally

¹The personnel of this committee is as follows:
Hon. Francis Fisher Kane, Philadelphia, Chairman.
Hon. Robert J. Sterrett, Philadelphia.
Dr. H. C. Stevens, University of Chicago.
Dr. L. L. Stanley, State Prison, San Quentin, Cal.
Dr. John Marshall, University of Pennsylvania, Philadelphia.
Albert J. Weber, Manhattan Club, New York City.

undesirable. There is no place for him. Perhaps some do slip in, but they, like the rotten apple spoiling the whole barrel, may teach our young soldiers their horrible vice. The rejection of these men for army service leaves them at home where they exist for the most part by petty crime.

On the other hand the "Work or Fight" edict has gone forth. This class can do neither. What is to become of them? True, they can be sent to state hospitals for cures, but every one knows how easy it is to relapse and how unsatisfactory the results of treatment are. Imprisonment does no good. In most prisons and jails dope can be brought in, and the addict only spends a little time away from his usual haunts, generally with many of his cronies, at the expense of the state.

Almost every one has some vice or weakness. This vice or weakness may be drink, immorality or other abnormal excess. In some these various weaknesses are developed more than in others, and some are able to hold them in submission while others are not. Drink is rapidly being checked. The government, in caring for its soldiers, has seen that spirituous liquors are becoming less and less accessible, and it is possible that before long there will be nation-wide prohibition. The tide is strongly turning that way. This movement is removing the temptation from the weakling.

The Federal authorities are caring for, in an unprecedented way, the health of the soldiers. By reducing prostitution to a minimum, by closing restricted districts and interning diseased women, the moral weakling is to a certain extent protected. But whereas the normal sex act is in this way decreased, it seems that there has sprung up a great deal of sexual degeneracy. This is evidenced by the exposé of various so-called "clubs" where many well known men have been caught in degenerate practices.

With a ban placed on drinking and normal sexual relations, the less strong will lower to some other outlet for their weakness. It may be expected that opium addictions will therefore be increased, even in spite of the restrictions placed on them.

In order to ascertain from each state the conditions there existing, the writer of this report of Drugs and Crime, Committee D, addressed to the Secretary of the Board of Pharmacy of each state a letter asking what narcotic laws are extant and what changes on legislation had been made in the past year, together with any other notes or bits of information regarding the subject.

Most of the states have been heard from and below the laws

are briefly stated. Preceding these synopses, it is timely to allude to the Harrison Act. After America occupied the Philippines the prevalence of the opium trade was brought to the world's notice. In 1909 the International Opium Commission, sitting in Shanghai, criticized the United States for its dereliction. As a result Congress passed the opium exclusion act. This act proving insufficient to suppress the opium trade, Representative Harrison, of New York, introduced three bills. The first increases the tax on opium importation and raises the manufacturers' bond. The second law is a re-enactment of the opium exclusion act of 1909, with severer provisions. In this, to obviate smuggling, the law shifts the burden of proof to the defendant to establish his innocence. Transshipments are prevented. The third one, with which most people are familiar, was passed December 10, 1914. As Congress has no power to enact regulations for the sale of any article within state boundary lines, this act was drafted under guise of revenue measures, and to regulate it through levying of a tax.

ALABAMA

Section 14 of the Alabama Pharmacy Laws declares it to be unlawful to sell, furnish, or give opium derivatives, except on original order of licensed physician, dentist or veterinarian. The prescription shall have date, name of person for whom prescribed, and shall be kept on file not less than five years by dispenser. There shall be no refill and no duplicate prescription issued. But this section allows the sale of "preparations containing opium, and recommended and sold in good faith for diarrhoea and cholera", each bottle or package cautioning against habitual use. It also allows the sale of Dover's Powder, and Tincture of Opium not exceeding one ounce to same person in one day. Preparations containing not more than two grains of opium or one fourth grain of heroin to the fluid ounce, are not affected by the above legislation. It is unlawful to prescribe any opium or cocaine derivatives for habitual users. This section has not been changed since 1915. Penalties are provided for any violations.

ARKANSAS

Secretary Frank Schachleiter of Little Rock, writes—"We are busy framing our narcotic law to be submitted to the legislature this winter. The tentative draft contains these chief features that were not compatible in the federal law: Unlawful to possess—unless under strict supervision of a physician or undergoing institutional treatment.

"Striking out the word *dealer* and making the registered pharmacist the only distributor or dispenser.

"The sale of exempted domestic and proprietary remedies—restricted to the hands of pharmacists.

"Severe penalties prescribed for violations.

"Will be pleased to have suggestions from you to aid in perfecting measure."

CALIFORNIA

It is unlawful to give, sell, offer to sell, furnish or have in possession, cocaine, opium, morphine, codeine, heroin, etc.—except upon proper prescription, such prescription to be permanently kept by dispenser and not again compounded, if each fluid ounce contains more than two grains of opium and one-fourth grain morphine, one grain codeine or one-eighth grain of heroin.

Wholesalers, jobbers and manufacturers of narcotic preparations shall keep the order blanks accessible for inspection by representatives of the Board of Pharmacy. These records are required under provision of section 2 of the Act of Congress, December 17, 1914.

It is unlawful to prescribe for any habitual user, or to prescribe narcotics for any one not under treatment in the regular practice of his profession. Exceptions are provided for the above.

Section 8a designates as a misdemeanor the possession of opium pipes, or pipes for smoking opium and its preparations. A penalty of \$100 to \$400, or by imprisonment from fifty to one hundred and eighty days, or both for first offense. More severe punishment is provided for second offenses, while for third offense a person shall be deemed guilty of a felony and sent to state prison for one to five years.

All narcotic drugs and opium pipes may be seized by any peace officer with search warrant. All such contraband shall be ordered destroyed within six months after it is delivered to the Board of Pharmacy, which may, however, dispose of it by gift to the state prisons and hospitals, or by sale to wholesalers.

The Pharmacy Board of California is quite active and is making strenuous efforts to curtail the use of narcotics. Special investigators are used, who secure many convictions.

COLORADO

It is punishable by fine of \$100 to \$300, and imprisonment of one to six months for unqualified person to sell, distribute or give away, or in any manner dispose of, narcotic preparations.

CONNECTICUT

The Secretary of State referred the communication regarding narcotic drug addictions to the Dairy and Food Commissioner, who has not replied. However, revision of several statutes of Connecticut, 1902, provide a punishment of twenty-five years' imprisonment for administering drugs to any person with intent to commit robbery or other crime.

Habitual users are not to be furnished with narcotics.

FLORIDA

No changes have been made in the Florida law since 1915. It is unlawful for pharmacist, druggist, person, firm or corporation to sell at retail opium or cocaine derivatives without qualified prescription. Prescriptions must bear date and serial number and be filled but once. Only licensed physicians, dentists and veterinary surgeons may prescribe, and they shall not prescribe for addicts except in certain cases. An habitual user who proves refractory or difficult to treat must be reported by the attending physician, to the State Board of Health or County Judge, who in turn shall bring such cases to the attention of the prosecuting officer of the county for prosecution.

HAWAII

Hawaii still has considerable difficulty with the drug problem, because of its population of mixed races, and its situation midway between China and America. Captain of Detectives McDuffie of Honolulu states that occasionally packages of narcotics are thrown overboard from transpacific liners, picked up by the Japanese fishermen, and later landed on the islands. Considerable work is necessary to control these rings.

The Board of Health may authorize any licensed person to sell opium and preparations thereof under certain restrictions, as physicians' prescriptions, etc.

Any person who shall use or smoke opium or any preparation thereof shall be guilty of a misdemeanor, and punishable with fine or imprisonment.

ILLINOIS

The following letter from Supt. of Registration F. C. Dodds, dated July 15, 1918, is as follows: "I have your letter of July 8, and take pleasure in inclosing herewith a copy of the pharmacy law in force July 1, 1917. On that date the Department of Registration and Education succeeded to all powers and duties vested by law in the Board

of Pharmacy. However, no change was made in the letter of the law."

The Illinois law restricts the sale or disposition of narcotics to licensed physicians, dentists or veterinaries who are registered with United States Collector of Internal Revenue, in accordance with Congressional Act of December 17, 1914. The physician must keep a record of the amount of narcotics used in his every-day practice. No prescribing for addict is allowed.

IOWA

This state law cites that none shall sell, or have in his possession with intent to sell, any coca, cocaine or derivatives. The law apparently leaves opium derivatives out of consideration entirely. The secretary writes: "Latest we have; not troubled much here in Iowa."

KENTUCKY

No legislation has been passed here since the national act. The act of 1912 restricts the sale and dispensing of opium derivatives but not cocaine. It allows patent and proprietary preparations to be sold, providing they contain less than two grains of opium to the ounce.

Violations are punishable by fines of not less than \$25, nor more than \$100.

INDIANA

This law embodies usual provisions of other states, restricting sale by druggists, preventing refills and duplicates. Requires wholesalers to report each month to board by mail, sales of narcotics. It excludes patent medicines of weakly narcotic preparation.

MARYLAND

Has no narcotic act up to and including 1916. The Secretary of Board of Pharmacy writes that, "there were no changes whatever made in our poison or other laws pertaining thereto by the last legislature."

MASSACHUSETTS

J. J. Tobin, Secretary Board of Pharmacy, states that the narcotic law has not changed since its enactment in 1917, and adds—"I wish to call your attention to a few provisions in our state law which are more stringent than the U. S. law. Section 1 provides that the prescription itself must bear a very complete record, so that there is practically no opportunity for a narcotic to be mistakenly sold for other than the use intended by the spirit of the law. Section 9 restricts the sale of cannabis indica and cannabis sativa, which are not included in the U. S. law.

No veterinarian shall prescribe for a human being. All buildings resorted to by users of narcotic drugs for purpose of using such drugs shall be deemed common nuisances.

The keeper of such a house is punishable by imprisonment for not more than one year.

It is unlawful, except in well defined limits, to have in possession hypodermic needle, syringe or other instrument adapted for use of narcotic drugs. Records must be kept of persons to whom such instruments are sold by the venders.

MINNESOTA

Secretary E. A. Tupper writes—"Apart from the laws inclosed, the only law under the act in this state, besides the Harrison Law, is the Nimocks Anti-Narcotic Law."

This law is different only in slight respects from the other state laws.

MICHIGAN

This state makes provision for patent medicines having small amounts of opium derivatives in them, but declares it unlawful for unqualified persons to have or trade in narcotics. This act was passed in 1915.

MISSISSIPPI

The only law pertaining to habit forming drugs is section 21, H. B. No. 91, enacted in 1916, which declares that the Board of Pharmacy may revoke the license of any pharmacist convicted of unlawfully selling morphine, cocaine or any habit forming drug.

NEVADA

Secretary J. W. Taber writes:—"Up to the present time no changes have been made in the laws of Nevada on habit forming drugs. We are going to try and put through several changes the first of the year, at the next session of the legislature."

NEW YORK

New York passed an act on May 13, 1918, for the regulation and control of the sale, prescribing, dispensing, dealing in and distribution of cocaine and its derivatives. A department of narcotic drug control, with one commissioner, is created. The commissioner receives \$6,000 annually, and is empowered to make rules to supplement the purposes of the act, and to enforce its provisions. The state may be divided

into four districts, and maintain office in each. The commissioner shall obtain data in re drug addictions, shall have power to inspect any institution for treatment of addicts, and shall report annually to the legislature. He shall have three deputies.

All persons dealing in narcotic drugs must register and receive certificate of authority. Orders must be made on official blanks. Various acts are permitted as per act 427. All containers of drugs shall be clearly labeled. Only qualified persons shall possess a hypodermic syringe. Wholesalers must keep records of sales open to inspection.

Drugs which have been seized shall be delivered to this department.

Any magistrate may commit an addict to state hospital for treatment. If a defendant is a prisoner in criminal procedure and it appears he is an addict, he may be committed at any stage of the proceedings and sentence be suspended. The trial is to be resumed when patient is discharged by chief medical officer.

Any public hospital may accept as charity patient any person voluntarily applying for treatment for drug addiction.

Twenty-four thousand dollars is appropriated for this act.

NORTH DAKOTA

Secretary U. S. Parker writes:—"There has been no legislation in this state for over two years. Our laws are such that, in addition to those covered by federal regulation, we can not sell without a physician's prescription, chloral hydrate or cannabis indica."

NEW HAMPSHIRE

"In response to yours of second would say that there has been no change in legislation in our state affecting the sale of habit-forming drugs during the past one and a half years.

"JAS. W. Dow, Secretary."

OKLAHOMA

Section 14 of General Laws makes it unlawful to retail opium and its preparations except paregoric and other preparations of opium containing less than two grains to ounce. This law apparently is not satisfactory.

OHIO

Law, not amended since 1913, is similar to that of most of the other states. Possession by unqualified person is unlawful. Only

licensed persons allowed to prescribe. Patent medicines allowed with limitations.

TEXAS

Only usual state law. Qualified prescription. No duplicate or refill. Unlawful to prescribe for addict. It is claimed that El Paso and the Texas border is a place of entry for opium smugglers from Mexico.

TENNESSEE

"We have no recent legislation on this subject, but we do have a law in effect which is very similiar in all its main provisions to the Harrison Act."

RHODE ISLAND

Legislation approved April, 1918, is quite complete and is similiar to Harrison Act in many respects. In the act there are eighteen sections.

VIRGINIA

No legislation since 1910. Possession unlawful. Qualified prescription. Violation considered felony.

VERMONT

"There have been no changes since the last session and as far as I can learn none are proposed at the coming session of the legislature.

"W. G. BEEBE, Secretary."

Legislation is usual type of other states.

WASHINGTON

D. B. Garrison, Secretary Board of Pharmacy, replies as follows: "Our law is virtually the Harrison Act without the teeth. Our law has not been altered for several years.

WISCONSIN

Ordinary law. Allows patent medicines with limitations. Forbids prescribing for habitual users. Restricts sale. Regulates prescriptions.